MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET

SERIAL NO. 10/243875   FILING DATE

APPLICANT(S)

9/89/8?

	AS FILED		AFTER 1ST AMENDMENT		AFTER 2ND AMENDMENT	
CLAIMS	IND	DEP	IND	DEP	IND	DEP
1						
2						
3						
4						
5						
6						
7						
8	1					
9	1					
10	1					
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						

CLAIMS	IND	DEP	IND	DEP	IND	DEP
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TOTAL IND.						
TOTAL DEP.						
TOTAL CLAIMS						